



FH  
[REDACTED]

**STATE OF WISCONSIN  
Division of Hearings and Appeals**

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In the Matter of

[REDACTED]  
[REDACTED]  
[REDACTED]  
[REDACTED]

**DECISION**  
Case #: MGE - 174721

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**PRELIMINARY RECITALS**

A petition was filed on May 31, 2016, under Wis. Stat., §49.45(5), to review a decision by the Milwaukee Enrollment Services to deny nursing home Medical Assistance (MA), a hearing was scheduled on November 8, 2016, by telephone. Hearings set for June 29, August 3, September 1, and October 5, 2016 were rescheduled at the petitioner's request.

No issue remains for determination.

**PARTIES IN INTEREST:**

Petitioner:

[REDACTED]  
[REDACTED]  
[REDACTED]  
[REDACTED]

Petitioner's Representative:

[REDACTED]  
[REDACTED]  
[REDACTED]

Respondent:

Department of Health Services  
1 West Wilson Street, Room 651  
Madison, WI 53703

By: [REDACTED]  
Milwaukee Enrollment Services  
1220 W. Vliet St.  
Milwaukee, WI 53205

**ADMINISTRATIVE LAW JUDGE:**

Brian C. Schneider  
Division of Hearings and Appeals

**DISCUSSION**

Petitioner (CARES # [REDACTED]) appealed a denial of nursing home MA. Prior to the hearing the parties entered into a stipulation that petitioner was eligible for MA during the period January 18, 2016 through

April 24, 2016, with a cost share liability of 4546.70 for February. No cost share was owed for January, March, or April, 2016. I thus will order the agency to grant the eligibility as agreed in the stipulation.

**THEREFORE, it is**

**ORDERED**

That the matter be remanded to the agency with instructions to grant petitioner nursing home MA eligibility for the period of January 18 through April 24, 2016, with a patient liability of \$546.70 for the month of February, and no patient liability for the other months. The agency shall do so within 10 days of this decision if it has not already done so.

**REQUEST FOR A REHEARING**

You may request a rehearing if you think this decision is based on a serious mistake in the facts or the law or if you have found new evidence that would change the decision. Your request must be **received within 20 days after the date of this decision**. Late requests cannot be granted.

Send your request for rehearing in writing to the Division of Hearings and Appeals, 5005 University Avenue, Suite 201, Madison, WI 53705-5400 **and** to those identified in this decision as "PARTIES IN INTEREST." Your rehearing request must explain what mistake the Administrative Law Judge made and why it is important or you must describe your new evidence and explain why you did not have it at your first hearing. If your request does not explain these things, it will be denied.

The process for requesting a rehearing may be found at Wis. Stat. § 227.49. A copy of the statutes may be found online or at your local library or courthouse.

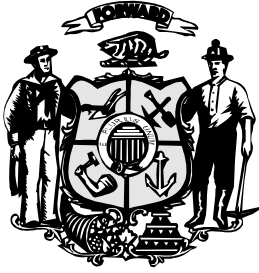
**APPEAL TO COURT**

You may also appeal this decision to Circuit Court in the county where you live. Appeals must be filed with the Court **and** served either personally or by certified mail on the Secretary of the Department of Health Services, 1 West Wilson Street, Room 651, **and** on those identified in this decision as "PARTIES IN INTEREST" **no more than 30 days after the date of this decision** or 30 days after a denial of a timely rehearing (if you request one).

The process for Circuit Court Appeals may be found at Wis. Stat. §§ 227.52 and 227.53. A copy of the statutes may be found online or at your local library or courthouse.

Given under my hand at the City of Madison,  
Wisconsin, this 8th day of November, 2016

\s \_\_\_\_\_  
Brian C. Schneider  
Administrative Law Judge  
Division of Hearings and Appeals



**State of Wisconsin\DIVISION OF HEARINGS AND APPEALS**

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The preceding decision was sent to the following parties on November 8, 2016.

Milwaukee Enrollment Services  
Division of Health Care Access and Accountability  
[REDACTED]